

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J.H.	12	9/1/12
O.I.P.E. CLASSIFIER			9/1/12
FORMALITY REVIEW		10017	10/2/10
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	2 9 2 5 11 3
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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